## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

WSP: 203-45

840

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN			
<del></del>			(Column 1)		(Column 2)		TYI	TYPE		OR	SMALL	SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	] [	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR.	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/   minus 20=		*		>	<b>(\$</b> 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*		>	<b>K</b> 42=		OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM P				+	140=	/	OR	+280=			
* If	the difference	ın column 1 ıs	less than z	than zero, enter "0" in column 2			T	OTAL		OR	TOTAL	79()	
CLAIMS AS AMENDED - PART II								'			OTHER	THAN	
		(Column 1)		(Colum		(Column 3)		MALL E	ENTITY	OR.	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CLAINA	-	×	(42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+	140=		OR	+280=		
								TOTAL:		OR	TOTAL		
										JO: 1	ADDIT FEE		
		(Column 1) CLAIMS		(Colur		(Column 3)			ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CLAIM	=	×	(42=		OR	X84=		
<u> </u>	FIRST PRESE	NTATION OF M	JETIPLE DE	PENDEN	CLAIM		+	140=		OR	+280=		
							ADD	TOTAL		OR	TOTAL ADDIT FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-	X	42=		On	X84=		
lacksquare	FIRST PRESENTATION OF MI		JLTIPLE DEPENDENT		CLAIM	uM 🔲				OR			
				1 2	. 0:	3		140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write 0' in column 3  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 lenter "20"  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 lenter "3"  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 lenter "3"													
	The "Highest Nur	nber Previously Pa	d For (Total	or Independe	enti is the	highest number	r found ii	n the app	ropriate box	in cot	սոր 1		